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Alcimededes

Offering your anatomy to the highest bidder is nothing new. Prostitution is often said to be the oldest profession in the world and has the advantage of allowing you to sell something that you can then sell again shortly afterwards. On the surface, prostitution sounds like the ideal business model and has certainly attracted its fair share of investors over the years.

However, in these times of worldwide austerity, there are media reports of desperation plunging to new depths with Indian farmers in the northern Indian state of Haryana offering their kidneys for sale.¹ Although selling organs in itself is not a new suggestion, what makes this story of renal prostitution slightly different is that many of the farmers are keen to make this fully legitimate, applying to the Indian Government for permission before proceeding with surgery. The idea is that the farmers won't face prosecution for their actions and also won't need to resort to back-street clinics for their surgery. The application has been made by India's Union of Farmers, who estimate that 90% of farmers are in debt. They have yet to receive a response from the Indian Government.

Unfortunately, unlike traditional prostitution, the donors won't be getting their body parts back. Moreover, some previous organ donations, including corneal grafts, have resulted in complications which have cost more to the patient to correct than the organ donation itself, leaving the already-impoorished donor handicapped both physically and financially. Desperate times, indeed.

Opponents of the death penalty will have read with glee that there has been yet another shortage of pentobarbital in Texas,² meaning that the inmates on Death Row have literally been offered a stay of execution until new supplies can be obtained. The Texas Department of Criminal Justice announced that its current batch of 46 vials of pentobarbital is due to expire in September 2013, and worldwide supplies have become increasingly difficult to obtain, either from manufacturers being concerned about its use in capital punishment or from public pressure from opponents of the death penalty. Texas provides approximately half of all state executions in the US, with 502 having occurred since 1982.

On the subject of long-term incarceration, the flexibility of the Human Rights Act 1998 has been tested yet again in the European Courts of Human Rights. Lawyers representing several "lifers", i.e. inmates who have been sentenced to whole-life tariffs for particularly gruesome and serious crimes, felt that their clients had been unfairly treated by being denied the possibility of release. Such a ruling, they argued, was a breach of their "Article 3", protecting them from inhuman or degrading treatment.³ The European judges obviously liked what they heard from the lifers' lawyers as they ruled in their favour, suggesting that reviews of their clients'

sentences should be conducted at 25 years, with further periodic reviews.

The Human Rights Act's reputation as the leading contortionist amongst statute therefore remains intact. Sadly, it is ironic that a piece of legislation that was designed to protect Human Rights in our individual and collective interests is held with such derision by the public.

Figures recently released by the Department of Health demonstrate that abortion rates in England and Wales were at their lowest since 1997 (Age-standardised rate was 16.5 abortions per 1000 women in 2012).⁴ Key findings were that:

- There were 185,122 abortions conducted in England and Wales in 2012, representing a 2.5% decrease compared with 2011 (189,931 abortions.)
- 97% of abortions were funded by the NHS, with 62% of abortions being provided in independent facilities, under NHS contracts.
- 48% of abortions were conducted on medical grounds, with approximately 1.5% (2692 abortions) being conducted on the rationale that the child would be born handicapped.
- 5850 abortions were conducted on women who were non-resident in England or Wales. This figure was the lowest since 1969.

Looking at such figures is one thing. Knowing how to interpret them is a completely different matter, although both sides of the argument will surely welcome an overall reduction in numbers.

Meanwhile, across the Irish Sea, the President of Ireland, Michael D Higgins, signed *The Protection of Life During Pregnancy Act 2013* into law on the 30th July 2013.⁵ This legislation will allow a limited number of abortions in Ireland if there is a threat to the life of the expectant mother (two doctors must be in agreement), including the risk of her suicide (three doctors must be in agreement).

The Chief Medical Officer for England, Professor Dame Sally Davies, has announced that healthcare workers in the UK who are HIV positive will be allowed to undertake invasive procedures on patients from April 2014, provided they are receiving, and responding to, retroviral treatment.⁶ It is believed that there are currently 110 healthcare workers in England who will be affected by this ruling.

The previous policy was based on figures and concerns from twenty years ago, prior to the advances made with retroviral therapy. However, Professor Davies stated that there have only ever been four confirmed cases of healthcare workers transmitting HIV to patients, and these were all overseas cases occurring before 2001. The new policy follows on from the recommendations of a report from a working party formed from the Expert Advisory Group on AIDS, the UK Advisory Panel for Healthcare Workers Infected with Bloodborne Viruses, and the Advisory Group on Hepatitis.

Laws and ethics surrounding the storage of DNA profiles are always complicated and contentious. “Personal liberties” frequently squares up to “Medical and forensic benefits” in a gory battle, resulting in each side claiming victory, and leaving the on-call cleaner unsure whether to mop up the blood, or keep it for analysis.

The Protection of Freedoms Bill will become law in Oct 2013 following a ruling from the European Court of Human Rights and will require DNA samples to be destroyed from the majority of individuals who are released without charge. Under the new legislation, police chiefs will have the right to appeal the disposal of DNA if there is a given concern regarding a particularly serious offence such as rape. In the meantime, up to 18,000 DNA profiles have been deleted prior to the appeals system coming into place, and this has attracted accusations of incompetence and criticism of the Home Office from the Shadow Home Secretary, Yvette Cooper.⁷

For those doctors who have failed to hear any nails being hammered furiously into the coffin of the medical profession, now

is the time to prick up your ears and have a forage with your cotton buds. In its recent annual report,⁸ the Medical Defence Union (MDU) has demonstrated a 15% increase in litigation in 2012 against its medical members, compared with figures from 2011. This compares with 2008–2011, which had seen average year-on-year increases of 8.6%.

The MDU has suggested that solicitors taking on cases on a conditional fee arrangement basis (“CFA”, commonly known as “No win, no fee”) is the single most important reason for the steep increase. To quote Shakespeare’s famous phrase “*The first thing we do, let’s kill all the lawyers*” would be totally unacceptable in this situation... especially in view of the shortage of pentobarbital.

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